

Fill in this information to identify your case and this filing

Debtor 1 William Lee Knight
First Name Middle Name Last Name

Debtor 2 Sherry Lynn Knight
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Southern District of Texas

Case number 16-20518

~~Clerk, U.S. District Court~~
 Southern District of Texas
 FILED

MAR 22 2017

David J. Bradley, Clerk of Court

☒ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
- ☒ Yes. Where is the property?

1.1. 2583
 Street address, if available, or other description

Arkansas

Ingleside Tx 78362
 City State ZIP Code

San Patricio
 County

What is the property? Check all that apply.

- ☒ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☒ Investment property
- ☐ Timeshare
- ☐ Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? \$ 72,562.00

Current value of the portion you own? \$ 0.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☒ Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number: _____

If you own or have more than one, list here:

1.2. 2780 Houghton
 Street address, if available, or other description

Ingleside Tx 78362
 City State ZIP Code

San Patricio
 County

What is the property? Check all that apply.

- ☒ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☒ Investment property
- ☐ Timeshare
- ☐ Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? \$ 10,000.00

Current value of the portion you own? \$ 10,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☒ Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number: See attached letter of Explanation

Debtor 1 William Lee Knight
First Name Middle Name Last Name

Case number (if known) 16-20518

1.3. 1511 Monkey Rd.
 Street address, if available, or other description

Rockport Tx 78362
 City State ZIP Code

County _____

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☒ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ 1,500.00
 Current value of the portion you own? \$ 1,500.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☒ Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. _____ →

\$ 11,500.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No
☒ Yes

3.1. Make: Hummer
 Model: H2
 Year: 2007
 Approximate mileage: 137000

Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☒ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ 15,375.00
 Current value of the portion you own? \$ 3,912.14

If you own or have more than one, describe here:

3.2. Make: Ford
 Model: F350
 Year: 1989
 Approximate mileage: 192532

Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ 1,500.00
 Current value of the portion you own? \$ 1,500.00

Debtor 1 **William Lee Knight**
 First Name Middle Name Last Name

Case number (if known) **16-20518**

3.3. Make: _____
 Model: _____
 Year: _____
 Approximate mileage: _____
 Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

☐ Check if this is community property (see instructions)

3.4. Make: _____
 Model: _____
 Year: _____
 Approximate mileage: _____
 Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

☐ Check if this is community property (see instructions)

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No
☐ Yes

4.1. Make: _____
 Model: _____
 Year: _____
 Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

☐ Check if this is community property (see instructions)

If you own or have more than one, list here:

4.2. Make: _____
 Model: _____
 Year: _____
 Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

☐ Check if this is community property (see instructions)

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here



\$ **5,412.14**

Debtor 1 **William Lee Knight**
 First Name Middle Name Last Name

Case number (if known) **16-20518****Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No☒ Yes. Describe..... Refrigerator, 2 Chairs and table, kitchenware, linens, pots/pans, 4 chairs,dishes,1 mattress, 1 bed, 1 night stand, 1 chest, washer/dryer\$ 975.00**7. Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No☒ Yes. Describe..... Tv, computer, printer, 2 cell phones\$ 450.00**8. Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☒ No☐ Yes. Describe.....

\$ _____

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☒ No☐ Yes. Describe.....

\$ _____

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☐ No☒ Yes. Describe..... 1 gun\$ 145.00**11. Clothes**

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No☒ Yes. Describe..... 20 Shirts, 4 shorts, 4 pants, 1 suite,1 pair tennis shoes, 10 ladies blouses, 5 slacks, 5 pairs shorts, 2 pairs of shoes\$ 200.00**12. Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☒ No☐ Yes. Describe.....

\$ _____

13. Non-farm animals

Examples: Dogs, cats, birds, horses

☐ No☒ Yes. Describe..... Multi-Shitzu dog\$ 10.00**14. Any other personal and household items you did not already list, including any health aids you did not list**☒ No☐ Yes. Give specific information.

\$ _____

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here →\$ 1,780.00

Debtor 1

William

Lee

Knight

Case number (if known) 16-20518

First Name Middle Name Last Name

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the
portion you own?Do not deduct secured claims
or exemptions.**16. Cash**

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☒ No☐ Yes

Cash: \$

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No☒ Yes

Institution name:

17.1. Checking account:	<u>Wells Fargo —TPG Copy</u>	\$ <u>412.00</u>
17.2. Checking account:	<u>Wells Fargo— Hurfus</u>	\$ <u>308.00</u>
17.3. Savings account:	<u>Wells Fargo</u>	\$ <u>0.00</u>
17.4. Savings account:	<u>Wells Fargo</u>	\$ <u>0.00</u>
17.5. Certificates of deposit:		\$
17.6. Other financial account:	<u>Wells Fargo—William Knight</u>	\$ <u>42.00</u>
17.7. Other financial account:	<u>Wells Fargo—Sherry Knight</u>	\$ <u>8.00</u>
17.8. Other financial account:		\$
17.9. Other financial account:		\$

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☒ No☐ Yes

Institution or issuer name:

	\$
	\$
	\$

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture☒ No☐ Yes. Give specific
information about
them

Name of entity:

% of ownership:

	0%	%	\$
	0%	%	\$
	0%	%	\$

Debtor 1 William Lee Knight
First Name Middle Name Last Name

Case number (if known) 16-20518

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

☒ No

☐ Yes. Give specific
information about
them.....

Issuer name:

\$ _____

\$ _____

\$ _____

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☒ No

☐ Yes. List each

account separately. Type of account: Institution name:

401(k) or similar plan: _____ \$ _____
 Pension plan: _____ \$ _____
 IRA: _____ \$ _____
 Retirement account: _____ \$ _____
 Keogh: _____ \$ _____
 Additional account: _____ \$ _____
 Additional account: _____ \$ _____

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☐ No

☒ Yes

Institution name or individual:

Electric: Source Power \$ 300.00
 Gas: _____ \$ _____
 Heating oil: _____ \$ _____
 Security deposit on rental unit: _____ \$ _____
 Prepaid rent: _____ \$ _____
 Telephone: _____ \$ _____
 Water: _____ \$ _____
 Rented furniture: _____ \$ _____
 Other: _____ \$ _____

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

☒ No

☐ Yes

Issuer name and description:

\$ _____

\$ _____

\$ _____

Debtor 1 **William Lee Knight**
 First Name Middle Name Last Name

Case number (if known) **16-20518**

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

 \$ _____

 \$ _____

 \$ _____

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

☒ No

☐ Yes. Give specific information about them....

\$ _____

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No

☐ Yes. Give specific information about them....

\$ _____

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No

☐ Yes. Give specific information about them....

\$ _____

Money or property owed to you?

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

☒ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.

Federal: \$ _____
 State: \$ _____
 Local: \$ _____

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No

☐ Yes. Give specific information.....

Alimony: \$ _____
 Maintenance: \$ _____
 Support: \$ _____
 Divorce settlement: \$ _____
 Property settlement: \$ _____

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits, unpaid loans you made to someone else

☒ No

☐ Yes. Give specific information.....

\$ _____

Debtor 1 **William Lee Knight**
 First Name Middle Name Last Name

Case number (# known) **16-20518****31. Interests in insurance policies**

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☒ No☐ Yes. Name the insurance company of each policy and list its value. ...

Company name:

Beneficiary:

Surrender or refund value:

\$ _____

\$ _____

\$ _____

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No☐ Yes. Give specific information.

\$ _____

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

☐ No☒ Yes. Describe each claim. \$40,000 UIM claim, \$10,000 judgment against Santos Roofing. \$21 \$ 52,200.00**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**☒ No☐ Yes. Describe each claim.

\$ _____

35. Any financial assets you did not already list☒ No☐ Yes. Give specific information.

\$ _____

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here →

\$ 53,270.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**37. Do you own or have any legal or equitable interest in any business-related property?**☐ No. Go to Part 6.☒ Yes. Go to line 38.**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned☐ No☒ Yes. Describe.

TPG Copy

\$ 420.00

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

☐ No☒ Yes. Describe.

1 Desk, 1 office chair, 1 computer

\$ 150.00

Debtor 1 **William Lee Knight**
 First Name Middle Name Last Name

Case number (if known) **16-20518****40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**☐ No

☒ Yes. Describe..... 1 Canon Copier, 1 Champion Cutter, 1 Champion Drill, 1 GBC table top punch, 1c \$ 1,450.00

41. Inventory☐ No

☒ Yes. Describe..... 2 boxes Canon Toner, 2 boxes 18mm coil \$ 200.00

42. Interests in partnerships or joint ventures☐ No

☒ Yes. Describe..... Name of entity: TPG Copy % of ownership: 100 % \$ 1,970.00
 _____ % _____ \$ _____
 _____ % _____ \$ _____

43. Customer lists, mailing lists, or other compilations☒ No

☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?

☐ No

☐ Yes. Describe..... \$ _____

44. Any business-related property you did not already list☒ No

☐ Yes. Give specific information \$ _____
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here

\$ 4,190.00

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
 If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?☒ No. Go to Part 7.☐ Yes. Go to line 47.

**Current value of the
portion you own?**

Do not deduct secured claims
or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

☒ No☐ Yes.....

\$ _____

Debtor 1 William Lee Knight
First Name Middle Name Last Name

Case number (if known) 16-20518

48. Crops—either growing or harvested

- ☒ No
☐ Yes. Give specific information.....

\$ _____

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

- ☒ No
☐ Yes.....

\$ _____

50. Farm and fishing supplies, chemicals, and feed

- ☒ No
☐ Yes.....

\$ _____

51. Any farm- and commercial fishing-related property you did not already list

- ☒ No
☐ Yes. Give specific information.....

\$ _____

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here

\$ 0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

- ☒ No
☐ Yes. Give specific information.....

\$ _____

\$ _____

\$ _____

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$ _____

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 → \$ 11,500.00

56. Part 2: Total vehicles, line 5 \$ 5,412.14

57. Part 3: Total personal and household items, line 15 \$ 1,780.00

58. Part 4: Total financial assets, line 36 \$ 53,270.00

59. Part 5: Total business-related property, line 45 \$ 4,190.00

60. Part 6: Total farm- and fishing-related property, line 52 \$ 0.00

61. Part 7: Total other property not listed, line 54 + \$ 0.00

62. Total personal property. Add lines 56 through 61. \$ 64,652.14 Copy personal property total → + \$ 64,652.14

63. Total of all property on Schedule A/B. Add line 55 + line 62.....

\$ 76,152.14

William Lee Knight

Sherry Lynn Knight

Case Number: 16-20518

Addition for Schedule A/B: Property

In response to Deborah Ferrell, Sr Case Analyst email dated Feb. 1st, 2017, item 6:

The property was bought for \$19,000.

We were scheduled to fight the property taxes down when we were involved in a major flood that happened in May, 2015 in Houston, Texas, and could not make the appointment. We do intend to do this when the appraisal district begins hearing cases again this year. The property is not livable. There is no power to the house, the slab is cracked and the roof will need to be torn off and replaced. We paid Santos Roofing to replace the roof but the contractor lied about being able to provide a Windstorm Certificate from a Windstorm Engineer and he did not pull any city permits as was required in the contract. The roof he installed will need to be taken completely off and redone. We took this to small claims court and we were awarded a \$10,000 judgement (this is noted in our schedules). In addition, the ceilings have been completely removed due to mold and rot due to the old roof. At this point the property is only worth lot value.

Sherry Knight

William Knight

William Lee Knight

Sherry Lynn Knight

Case Number: 16-20518

10/3

~~Addition for Schedule A/B: Property~~

In response to Deborah Ferrell, Sr Case Analyst email dated Feb. 1st, 2017, item 6:

We have no property, personal or real in Harris Co.

Sherry Knight

William Knight

William Lee Knight

Sherry Lynn Knight

Case Number: 16-20518

Addition for Schedule A/B: Property

In response to Deborah Ferrell, Sr Case Analyst email dated Feb. 1st, 2017, item 6:

6. Household goods and furnishings:

Refrigerator: \$175.00
2 Living room Chairs: \$100.00
1 Table: \$75.00
Kitchenware: \$25.00
Linens: \$20.00
Pots/Pans: \$20.00
4 Dining chairs: \$100.00
Dishes: \$20.00
1 Mattress: \$155.00
1 Bed Headboard: \$75.00
1 Night Stand: \$10.00
1 Chest: \$25.00
Washer/Dryer: \$175.00

Total: \$975.00

7. Electronics:

TV: \$150.00
Computer: \$100.00
Printer: \$25.00
2 Cell Phones: \$175.00

Total: \$450.00

11. Clothes:

20 Mens Shirts: \$55.00
4 Mens Shorts: \$20.00
4 Mens Pants: \$35.00
1 Mens Suit: \$20.00
1 Pair Mens tennis shoes: \$5.00

10 Ladies blouses: \$25.00
5 Ladies slacks: \$15.00
5 Ladies Shorts: \$15.00
2 pair Ladies shoes: \$10.00

Total: \$200.00

33: Claims against third parties:

\$40,000 UIM Claim, Lance Walters with Tracy Fox Law Firm
\$10,000 Judgement against Santos Roofing
\$200 claim against Pamala Stewart, Bankruptcy Attorney

Total: \$53,270.00

40. Machinery, fixtures, equipment, tools of the trade:

1 Canon 7105 printer: \$750.00
1 Champion Cutter: \$100.00
1 Champion Drill: \$100.00
1 GBC tabletop punch: \$100.00
1984 Grady boat hull on trailer: \$200.00
1974 Gibson boat hull on trailer: \$200.00

Total: \$1450.00

41. Inventory:

2 boxes Canon Toner: \$100.00
2 boxes 18mm coil: \$100.00

Total: \$200.00

Clerk, U.S. District Court
Southern District of Texas
FILED

MAR 22 2017

David J. Bradley, Clerk of Court

Fill in this information to identify your case.

Debtor 1	William	Lee	Knight
	First Name	Middle Name	Last Name
Debtor 2	Sherry	Lynn	Knight
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Southern District of Texas			
Case number (if known)	16-20518		

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: <u>2583 Arkansas</u> Line from <i>Schedule A/B</i> : <u>1.1</u>	\$ <u>72,562.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Const. Art. 16 §§ 50, 51, Tex. Prop. Code §§ 41.001, 41.002
Brief description: <u>2780 Houghton</u> Line from <i>Schedule A/B</i> : <u>1.2</u>	\$ <u>10,000.00</u>	<input checked="" type="checkbox"/> \$ <u>10,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Const. Art. 16 §§ 50, 51, Tex. Prop. Code §§ 41.001, 41.002
Brief description: _____ Line from <i>Schedule A/B</i> : _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
☐ No
☐ Yes

Debtor 1

William

Lee

Knight

Case number (if known) 16-20518

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property

Current value of the portion you own

Amount of the exemption you claim

Specific laws that allow exemption

Copy the value from Schedule A/B

Check only one box for each exemption

Brief description: Mobile Home
Line from Schedule A/B: 1.3\$ 1,500.00☒ \$ 1,500.00☐ 100% of fair market value, up to any applicable statutory limit

Tex. Prop. Code §§ 42.002

Brief description: 2007 Hummer
Line from Schedule A/B: 3.1

\$ _____

☐ \$ _____☒ 100% of fair market value, up to any applicable statutory limit

Tex. Prop. Code §§ 42.001 (a), 42.002(a)(9)

Brief description: Refrigerator, 2 Chair
Line from Schedule A/B: 6\$ 975.00☒ \$ 975.00☐ 100% of fair market value, up to any applicable statutory limit

Tex. Prop. Code §§ 42.001 (a), 42.002(a)(1)

Brief description: Tv, computer, printer
Line from Schedule A/B: 7\$ 450.00☒ \$ 450.00☐ 100% of fair market value, up to any applicable statutory limit

Tex. Prop. Code §§ 42.001 (a), 42.002(a)(1)

Brief description: 1 gun
Line from Schedule A/B: 10\$ 145.00☐ \$ 145.00☐ 100% of fair market value, up to any applicable statutory limit

Tex. Prop. Code §§ 42.001 (a), 42.002(a)(7)

Brief description: 20 Shirts, 4 shorts, 4
Line from Schedule A/B: 11\$ 200.00☒ \$ 200.00☐ 100% of fair market value, up to any applicable statutory limit

Tex. Prop. Code §§ 42.001 (a), 42.002(a)(5)

Brief description: Malti Shitz
Line from Schedule A/B: 13\$ 10.00☒ \$ 10.00☐ 100% of fair market value, up to any applicable statutory limit

Tex. Prop. Code §§ 42.001 (a), 42.002(a)(10)

Brief description: \$40,000 UIM claim,
Line from Schedule A/B: 33\$ 54,300.00☐ \$ 54,300.00☐ 100% of fair market value, up to any applicable statutory limit

Tex. Ins. Code ANN. 1108.051

Brief description: 1 Canon Copier, 1 C
Line from Schedule A/B: 40\$ 1,450.00☒ \$ 1,450.00☐ 100% of fair market value, up to any applicable statutory limit

Tex. Prop. Code §§ 42.001 (a), 42.002(a)(4)

Brief description: TPG Copy
Line from Schedule A/B: 42\$ 1,970.00☒ \$ 1,970.00☐ 100% of fair market value, up to any applicable statutory limit

Tex. Prop. Code §§ 42.001 (a), 42.002(a)(4)

Brief description: 1989 Ford F350
Line from Schedule A/B: 3.2\$ 1,500.00☒ \$ 1,500.00☐ 100% of fair market value, up to any applicable statutory limit

Tex. Prop. Code §§ 42.001 (a), 42.002(a)(9)

Brief description: _____
Line from Schedule A/B: _____

\$ _____

☐ \$ _____☐ 100% of fair market value, up to any applicable statutory limit

Fill in this information to identify your case:

Debtor 1	William	Lee	Knight
	First Name	Middle Name	Last Name
Debtor 2	Sherry	Lynn	Knight
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Southern District of Texas			
Case number (if known)	16-20518		

Block, U.S. District Court
Southern District of Texas
FILED

MAR 22 2017

David J. Bradley, Clerk of Court

☒ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion if any
--	--	--

2.1 Guild Mortgage

Describe the property that secures the claim:

\$ 79,188.89	\$ 72,562.00	\$
--------------	--------------	----

Creditor's Name
5898 Copley

2583 Arkansas, Ingleside, Texas 78362

Number Street

San Diego CA 92111

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☐ Other (including a right to offset) _____

Who owes the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☒ Check if this claim relates to a community debt

Date debt was incurred 09/06/2013

Last 4 digits of account number _____

2.2 Ally

Describe the property that secures the claim:

\$ 11,462.89	\$ 11,902.00	\$
--------------	--------------	----

Creditor's Name
p.o. bx 380901

2007 H2 Hummer

Number Street

Bloomington Mn 55438

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☐ Other (including a right to offset) _____

Who owes the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another

☐ Check if this claim relates to a community debt

Date debt was incurred 04/15/2014

Last 4 digits of account number 2 5 1 6

Add the dollar value of your entries in Column A on this page. Write that number here:

\$ 90,651.78

Debtor 1 William Lee Knight
 First Name Middle Name Last Name

Case number (if known) 16-20518**Part 1: Additional Page**

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Column A	Column B	Column C
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion if any

<input type="checkbox"/>	Describe the property that secures the claim: \$ _____ \$ _____ \$ _____ Creditor's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____
	Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt		
	Date debt was incurred _____ Last 4 digits of account number _____		
	Add the dollar value of your entries in Column A on this page. Write that number here: \$ _____ If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$ _____		

<input type="checkbox"/>	Describe the property that secures the claim: \$ _____ \$ _____ \$ _____ Creditor's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____
	Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt		
	Date debt was incurred _____ Last 4 digits of account number _____		
	Add the dollar value of your entries in Column A on this page. Write that number here: \$ _____ If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$ _____		

<input type="checkbox"/>	Describe the property that secures the claim: \$ _____ \$ _____ \$ _____ Creditor's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____
	Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt		
	Date debt was incurred _____ Last 4 digits of account number _____		
	Add the dollar value of your entries in Column A on this page. Write that number here: \$ _____ If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$ _____		

Debtor 1 William Lee Knight
 First Name Middle Name Last Name

Case number (if known) 16-20518

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

☒ Hughes, Watters & Askanase, L.L.P.
 Name
Attorneys At Law
 Number Street
1201 Louisiana, suite 2800
Houston Texas 77002
 City State ZIP Code

On which line in Part 1 did you enter the creditor? 2.1
 Last 4 digits of account number 6 9 2 0

☐
 Name
 Number Street
 City State ZIP Code

On which line in Part 1 did you enter the creditor? _____
 Last 4 digits of account number _____

☐
 Name
 Number Street
 City State ZIP Code

On which line in Part 1 did you enter the creditor? _____
 Last 4 digits of account number _____

☐
 Name
 Number Street
 City State ZIP Code

On which line in Part 1 did you enter the creditor? _____
 Last 4 digits of account number _____

☐
 Name
 Number Street
 City State ZIP Code

On which line in Part 1 did you enter the creditor? _____
 Last 4 digits of account number _____

☐
 Name
 Number Street
 City State ZIP Code

On which line in Part 1 did you enter the creditor? _____
 Last 4 digits of account number _____

Subject: Appraisal of your 2007 HUMMER H2 from Edmunds.com

From: Edmunds.com (used-appraisal@edmunds.com)

To: williamknight@yahoo.com;

Date: Sunday, February 5, 2017 9:56 AM

16-20518

William L Knight
 JERRY L Knight

edmunds

Hi w k,

Here's our appraisal of your 2007 HUMMER H2 :



Would you recommend this car?

(click to rate)

2007 HUMMER H2 Base 4dr SUV

	rough	average	clean	outstanding
TRADE-IN	\$10,473	\$11,902	\$15,326	\$17,219
PRIVATE PARTY	\$11,824	\$13,461	\$17,206	\$19,224

True Market Value ®

Trade-in	\$11,902
Dealer Retail	\$15,861
Private Party Sale	\$13,461

Customized True Market Value Prices ®

	Trade-in
National Base Price	\$14,813
Optional Equipment	\$799
Color Adjustment - Glacier Blue Metallic	\$-9
Regional Adjustment (zip 77002)	\$301
Mileage Adjustment - 130,000 miles	\$-556
Condition Adjustment - Average	\$-3,446
Total	\$11,902

Private Party

National Base Price	\$16,516
Optional Equipment	\$945
Color Adjustment - Glacier Blue Metallic	\$-10
Regional Adjustment (zip 77002)	\$336
Mileage Adjustment - 130,000 miles	\$-556
Condition Adjustment - Average	\$-3,770
Total	\$13,461

Dealer Retail

National Base Price	\$19,097
Optional Equipment	\$1,179
Color Adjustment - Glacier Blue Metallic	\$-12
Regional Adjustment (zip 77002)	\$388
Mileage Adjustment - 130,000 miles	\$-556
Condition Adjustment - Average	\$-4,235
Total	\$15,861

Buying a Certified Used Vehicle

Dealer Retail

Certified Used Price	\$0
----------------------	-----

Terms Defined

Trade-in: This is the amount you can expect to receive when you trade in your used car and purchase a new car. The trade-in price is usually credited as a down payment on the new car.

Dealer Retail: This is what other customers have paid for similar cars in your area. Dealer retail will usually be higher than private party prices and much higher than trade-in prices.

Certified Used Price: A used vehicle offered for sale by a franchised dealer for that vehicle make and who follows the manufacturer's requirements for 'certifying' the vehicle (including inspection and service) and which, upon sale, is accompanied by a manufacturer-backed warranty.

Fill in this information to identify your case

Debtor 1	William	Lee	Knight
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Sherry	Lynn	Knight
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Southern District of Texas			
Case number (if known)	16-20518		

Clerk, U.S. District Court
Southern District of Texas
FILED

MAR 22 2017

David J. Bradley, Clerk of Court

☒ Check if this is an
amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☒ No. Go to Part 2.
☐ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.
 (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

2.1

	Total claim	Priority amount	Nonpriority amount
Priority Creditor's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____ Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ \$ _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____		

2.2

Priority Creditor's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____ Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ \$ _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____		
--	---	--	--

Debtor 1

William

Lee

Knight

Case number (if known) 16-20518

First Name Middle Name Last Name

Part 1: Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Total claim	Priority amount	Nonpriority amount

☐

Priority Creditor's Name _____

Last 4 digits of account number _____ \$ _____ \$ _____ \$ _____

Number _____ Street _____

When was the debt incurred? _____

City _____ State _____ ZIP Code _____

As of the date you file, the claim is: Check all that apply.

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify _____

Is the claim subject to offset?

- ☐ No
☐ Yes

☐

Priority Creditor's Name _____

Last 4 digits of account number _____ \$ _____ \$ _____ \$ _____

Number _____ Street _____

When was the debt incurred? _____

City _____ State _____ ZIP Code _____

As of the date you file, the claim is: Check all that apply.

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify _____

Is the claim subject to offset?

- ☐ No
☐ Yes

☐

Priority Creditor's Name _____

Last 4 digits of account number _____ \$ _____ \$ _____ \$ _____

Number _____ Street _____

When was the debt incurred? _____

City _____ State _____ ZIP Code _____

As of the date you file, the claim is: Check all that apply.

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify _____

Is the claim subject to offset?

- ☐ No
☐ Yes

Debtor 1

William

Lee

Knight

Case number (if known) 16-20518

First Name Middle Name Last Name

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

- ☒ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☐ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.1	Baylor College of Medicine State Collection Serv. <small>Nonpriority Creditor's Name</small> <u>2509 S. Stoughton Rd.</u> <small>Number Street</small> <u>Madison</u> <u>WI</u> <u>53716</u> <small>City State ZIP Code</small>	Last 4 digits of account number _____ When was the debt incurred? _____	Total claim \$ <u>850.00</u>
<p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>			
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Services</u></p>			

4.2	Chase Card <small>Nonpriority Creditor's Name</small> <u>P.o. Bx. 15298</u> <small>Number Street</small> <u>Wilmington</u> <u>DE</u> <u>19850</u> <small>City State ZIP Code</small>	Last 4 digits of account number <u>8 0 5 4</u> When was the debt incurred? <u>01/20/2015</u>	\$ <u>3,819.00</u>
<p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>			
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u></p>			

4.3	Christus Spohn Hospital TLRA <small>Nonpriority Creditor's Name</small> <u>2707 N. Loop West, suite 400</u> <small>Number Street</small> <u>Houston</u> <u>Tx</u> <u>77008</u> <small>City State ZIP Code</small>	Last 4 digits of account number _____ When was the debt incurred? _____	\$ <u>8,350.00</u>
<p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>			
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Services</u></p>			

Debtor 1 William Lee Knight
First Name Middle Name Last Name

Case number (if known) 16-20518

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.4

Citibank Sd, Na Citi Corp Credit Serv.

Nonpriority Creditor's Name

P.O.BX 790040

Number Street

St. Louis

MO

63179

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No

☐ Yes

Last 4 digits of account number 3 8 8 3

\$ 2,265.00

When was the debt incurred? 06/01/2013

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Credit Card

4.5

Citibank/The Home Depot Centralized Bankruptcy

Nonpriority Creditor's Name

P.O. Bx. 4790040

Number Street

St. Louis

MO

63179

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No

☐ Yes

Last 4 digits of account number 0 5 3 0

\$ 215.00

When was the debt incurred? 04/01/2013

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Credit Card

4.6

Credit One

Nonpriority Creditor's Name

P.O.Bx. 98873

Number Street

Las Vegas

NV

89193

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No

☐ Yes

Last 4 digits of account number 3 7 9 7

\$ 847.00

When was the debt incurred? 02/01/2012

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Credit Card

Debtor 1

William

Lee

Knight

First Name

Middle Name

Last Name

Case number (if known) 16-20518

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim**4.7****First Premier Bank**

Nonpriority Creditor's Name

601 S. Minnesota Ave

Number Street

Sioux Falls

SD

57104

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No
☐ Yes

Last 4 digits of account number 6 5 2 7\$ 847.00When was the debt incurred? 02/01/2012

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Credit Card

4.8**Harris County Health System**

Nonpriority Creditor's Name

P.O. Bx. 4831

Number Street

Houston

Tx

77210

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No
☐ Yes

Last 4 digits of account number _____

\$ 450.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Medical Services

4.9**Merrick Bank Attn: Bankruptcy**

Nonpriority Creditor's Name

P.O.Bx. 9201

Number Street

Old Bethpage

NY

11804

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No
☐ Yes

Last 4 digits of account number 3 3 4 0\$ 1,560.00When was the debt incurred? 06/01/2013

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Credit Card

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.4

On Deck

Nonpriority Creditor's Name

901 N. Stuart St., #700

Number Street

Arlington

VA

22203

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No
☐ Yes

Last 4 digits of account number

\$ 16,000.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Unsecured Loan

4.4

One Main Financial Gulfway Shopping CTR

Nonpriority Creditor's Name

6012 S. Padre Island Dr.

Number Street

Corpus Christi

TX

78412

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No
☐ Yes

Last 4 digits of account number

\$ 10,000.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Unsecured Loan

4.4

Sparkling Sea Emergency Physicians

Nonpriority Creditor's Name

P.O.Bx. 42944

Number Street

Philadelphia

PA

19101

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No
☐ Yes

Last 4 digits of account number

\$ 350.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Medical Services

Debtor 1 William Lee Knight
First Name Middle Name Last Name

Case number (if known) 16-20518

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.4

Synch/Conns

Nonpriority Creditor's Name

c/o P.O.Bx 965036

Number Street

Orlando

FL

32896

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No

☐ Yes

Last 4 digits of account number 7 8 4 4

\$ 1,202.00

When was the debt incurred? 01/01/2014

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Charge Acct

4.4

Synch/Conns

Nonpriority Creditor's Name

c/o P.O.Bx. 965036

Number Street

Orlando

FL

32896

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No

☐ Yes

Last 4 digits of account number 1 5 7 9

\$ 415.00

When was the debt incurred? 06/01/2014

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Charge Acct

4.4

UT Physicians

Nonpriority Creditor's Name

P.O.Bx. 30179

Number Street

Dallas

TX

75303

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☒ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No

☐ Yes

Last 4 digits of account number

\$ 250.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Medical Services

Debtor 1

William

Lee

Knight

Case number (if known) 16-20518

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.4

Tejas/Office Effects

Nonpriority Creditor's Name

1225 W. 20th St.

Number Street

Houston

Texas 77008

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No
☐ Yes

Last 4 digits of account number _____

\$ 12,085.54

When was the debt incurred? 01/21/2014

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Charge Acct

4.4

Internal Revenue Service

Nonpriority Creditor's Name

3651 S. Interstate 35, Frontage rd.

Number Street

Austin

Texas 78741

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No
☐ Yes

Last 4 digits of account number 1 1 4 9

\$ 6,513.90

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify _____

Last 4 digits of account number _____

\$ _____

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify _____

Debtor 1

William

Lee

Knight

Case number (if known) 16-20518

First Name Middle Name Last Name

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

P. Scott Lowery, P.C.

Name

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street

Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

2840 Keller Springs Rd., suite 1202

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Carrollton

Tx

75006

Last 4 digits of account number _____

City

State

ZIP Code

Name

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number _____

City

State

ZIP Code

Name

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number _____

City

State

ZIP Code

Name

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number _____

City

State

ZIP Code

Name

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number _____

City

State

ZIP Code

Name

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number _____

City

State

ZIP Code

Name

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number _____

City

State

ZIP Code

Debtor 1

William

Lee

Knight

Case number (if known) 16-20518

First Name Middle Name Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. \$ _____
	6b. Taxes and certain other debts you owe the government	6b. \$ 6,513.90
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ _____
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + \$ _____
	6e. Total. Add lines 6a through 6d.	6e. \$ 6,513.90

		Total claim
Total claims from Part 2	6f. Student loans	6f. \$ _____
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ _____
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ _____
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + \$ 59,505.54
	6j. Total. Add lines 6f through 6i.	6j. \$ 59,505.54

William Lee Knight

Sherry Lynn Knight

Case Number: 16-20518

In response to Deborah Ferrell, Sr Case Analyst email dated Feb. 1st, 2017, item 14:

We were temporarily operating our business out of this facility and storing personal items. We no longer have this unit.

Sherry Knight

William Knight

William Lee Knight

Sherry Lynn Knight

Case Number: 16-20518

In response to Deborah Ferrell, Sr Case Analyst email dated Feb. 1st, 2017, item 12:

We are receiving income from 2583 Arkansas, it is a rental property.

Income is \$1800 per month and is disclosed in schedules. This is \$1200 for the house and \$600 for the garage. Per our phone conversation this will be added to all future MOR reports and identified as such. I will also be noted in the bank statements you request.

Sherry Knight

William Knight

Fill in this information to identify your case:

Debtor 1	<u>William</u>	<u>Lee</u>	<u>Knight</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Sherry</u>	<u>Lynn</u>	<u>Knight</u>
	First Name	Middle Name	Last Name

United States Bankruptcy Court for the: Southern District of Texas

Case number (if known) 16-20518

Clerk, U.S. District Court
Southern District of Texas
FILED

MAR 22 2017

David J. Bradley, Clerk of Court

Check if this is:

- ☒ An amended filing
☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

- ☒ Employed
☐ Not employed

- ☒ Employed
☐ Not employed

Occupation

Printer

Printer

Employer's name

TPG Copy

TPG Copy

Employer's address

2583 Arkansas
Number Street

2583 Arkansas
Number Street

Ingleside Tx 78362
City State ZIP Code

Ingleside Tx 78362
City State ZIP Code

How long employed there? 20 yrs

20 yrs

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	\$ <u>552.60</u>	\$ <u>552.60</u>
3. Estimate and list monthly overtime pay.	+ \$ <u> </u>	+ \$ <u> </u>
4. Calculate gross income. Add line 2 + line 3.	\$ <u>552.60</u>	\$ <u>552.60</u>

Debtor 1 William Lee Knight
First Name Middle Name Last Name

Case number (if known) 16-20518

	For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here..... → 4.	\$ 552.60	\$ 552.60	
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a. \$ _____	\$ _____	
5b. Mandatory contributions for retirement plans	5b. \$ _____	\$ _____	
5c. Voluntary contributions for retirement plans	5c. \$ _____	\$ _____	
5d. Required repayments of retirement fund loans	5d. \$ _____	\$ _____	
5e. Insurance	5e. \$ _____	\$ _____	
5f. Domestic support obligations	5f. \$ _____	\$ _____	
5g. Union dues	5g. \$ _____	\$ _____	
5h. Other deductions. Specify: _____	5h. + \$ _____	+ \$ _____	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$ _____	\$ _____	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 552.60	\$ 552.60	
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 347.77	\$ 347.77	
8b. Interest and dividends	8b. \$ _____	\$ _____	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ _____	\$ _____	
8d. Unemployment compensation	8d. \$ _____	\$ _____	
8e. Social Security	8e. \$ _____	\$ _____	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ 194.00	\$ _____	
8g. Pension or retirement income	8g. \$ _____	\$ _____	
8h. Other monthly income. Specify: _____	8h. + \$ _____	+ \$ _____	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	\$ 541.77	\$ 347.77	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	\$ 1,094.37	\$ 900.37	= \$ 1,994.74
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____			
			11. + \$ _____
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies			12. \$ 1,994.74 Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: _____			

MAR 22 2017

Fill in this information to identify your case

Debtor 1	William	Lee	Knight
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Sherry	Lynn	Knight
	First Name	Middle Name	Last Name

United States Bankruptcy Court for the: Southern District of Texas

Case number (if known) 16-20518

Check if this is:

David J. Bradley, Clerk of Court

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☐ No. Go to line 2.
- ☒ Yes. Does Debtor 2 live in a separate household?
- ☒ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

☒ No☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

☐ No☐ Yes☐ No☐ Yes☐ No☐ Yes☐ No☐ Yes☐ No☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☒ No
- ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

Your expenses

4. \$ 764.46

If not included in line 4:

4a. Real estate taxes

4a. \$

4b. Property, homeowner's, or renter's insurance

4b. \$

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 50.00

4d. Homeowner's association or condominium dues

4d. \$

Debtor 1 William Lee Knight
First Name Middle Name Last Name

Case number (if known) 16-20518

Your expenses

- | | | |
|---|------|------------------|
| 5. Additional mortgage payments for your residence, such as home equity loans | 5. | \$ _____ |
| 6. Utilities: | | |
| 6a. Electricity, heat, natural gas | 6a. | \$ <u>150.00</u> |
| 6b. Water, sewer, garbage collection | 6b. | \$ _____ |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ _____ |
| 6d. Other. Specify: _____ | 6d. | \$ _____ |
| 7. Food and housekeeping supplies | 7. | \$ <u>300.00</u> |
| 8. Childcare and children's education costs | 8. | \$ _____ |
| 9. Clothing, laundry, and dry cleaning | 9. | \$ _____ |
| 10. Personal care products and services | 10. | \$ _____ |
| 11. Medical and dental expenses | 11. | \$ _____ |
| 12. Transportation. Include gas, maintenance, bus or train fare.
Do not include car payments. | 12. | \$ <u>200.00</u> |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ _____ |
| 14. Charitable contributions and religious donations | 14. | \$ _____ |
| 15. Insurance.
Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | 15a. | \$ _____ |
| 15b. Health insurance | 15b. | \$ _____ |
| 15c. Vehicle insurance | 15c. | \$ _____ |
| 15d. Other insurance. Specify: _____ | 15d. | \$ _____ |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.
Specify: <u>Property Taxes for Houghton Property</u> | 16. | \$ <u>91.66</u> |
| 17. Installment or lease payments: | | |
| 17a. Car payments for Vehicle 1 | 17a. | \$ <u>575.26</u> |
| 17b. Car payments for Vehicle 2 | 17b. | \$ _____ |
| 17c. Other. Specify: _____ | 17c. | \$ _____ |
| 17d. Other. Specify: _____ | 17d. | \$ _____ |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$ _____ |
| 19. Other payments you make to support others who do not live with you.
Specify: _____ | 19. | \$ _____ |
| 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. | | |
| 20a. Mortgages on other property | 20a. | \$ _____ |
| 20b. Real estate taxes | 20b. | \$ _____ |
| 20c. Property, homeowner's, or renter's insurance | 20c. | \$ _____ |
| 20d. Maintenance, repair, and upkeep expenses | 20d. | \$ _____ |
| 20e. Homeowner's association or condominium dues | 20e. | \$ _____ |

Debtor 1 William Lee Knight
First Name Middle Name Last Name

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21. Other. Specify: _____

21. +\$ _____

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \$ 1,831.38

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$ _____

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$ 1,831.38

23. Calculate your monthly net income.

23a. Copy line 12 (*your combined monthly income*) from *Schedule I*.

23a. \$ 1,994.74

23b. Copy your monthly expenses from line 22c above.

23b. - \$ 1,831.38

23c. Subtract your monthly expenses from your monthly income.
 The result is your *monthly net income*.

23c. \$ 163.36

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes. Explain here: